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U.S. Department of Justice United States Marshals Service

PROCESS RECEIPT AND RETURN
See Instructions for "Service of Process by the U.S. Marshal" on the reverse of this form.

PLAINTIFF	7 12-215	h ====(CA NO . OS								
DEFENDANT MARK BLUE						TYPE OF PROCESS								
SEDVE (· · · · ·		CORPORATION	N. ETC TO SERVE O	DR DESCRIE	PTION OF PROPERTY TO	SEIZE OR CO	ONDEMN						
SERVE		BULE		- 1	17/0									
- ▼	ADDRESS (Street or		-	_	100	0								
					1980	19809								
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW: TIMME LEWIS, SOI # 506622 DEL. CORR. CENTER 1181 PADDOCK RO LSMYRWA, DE 19977						Number of process to be served with this Form - 285		4						
										Number of parties to be served in this case Check for service		44		
						on U.S.A.								
							RUCTIONS OR OTHER			SIST IN EXPEDITIN	G SERVICE	(Include Business and A	Alternate Addre	esses, All
						Fold Numb	ers, and Estimated Times			, (1.0 /10 0	La la	Fold
	Comp	LAINTS	ARE	DATEL) ;7	/18/06, 3	109 10	رد						
				,	1	16/05,1	1/2/	15						
	(FORM	hA P	AUPER	2/5	'/	6/00/1	1370	,						
	<u>C</u> , .													
Signature of Attor	rney or other Originator req	uesting service on	behalf of:	PLAINTIFF	TELEP	HONE NUMBER	DATE	lak						
Jim	mil	sure		☐ DEFENDAN	IT	1/+	///	100						
SPACE B	ELOW FOR US	E OF U.S.	MARSHA	L ONIX — D	O NOT	WRITE BELOV	W THIS	LINE						
I acknowledge re- number of proces		Process District of Origin	District to Serve	Signature of Auth	orized USM	S Deputy or Clerk	Da	te						
	USM 285 if more	No.	No			BE	/	6-4-0						
	nd return that I have per				executed as	shown in "Remarks", the p	rocess describe	ed ed						
	eompany, eorporation, etc													
☐ I hereby cert	ify and return that I am	inable to locate th	he individual, co	ompany, corporation.	etc., named	above (See remarks belo	w)							
Name and title of	f individual served (if no	t shown above)	(01)			A person of s	uitable age an	d dis- efendant's						
mn (urison,	Hamir	V OTT	1ak		usual plaee of	abode.							
Address (complet	e only if different thấn sho	wn above)				Date of Service	Time O Çu	am),						
						Signature of U.S.	<u>/ § ;</u>	on pm						
						Signature of U.S.	Marsha or De							
Serviee Fee	Total Mileage Charges	Forwarding Fee	Total Charges	Advance Deposits	Amount o	wed to U.S. Marshal or	Amount of I	COT SERVE						
	(including endeavors)	_		-			٠ - «وق	HAND HAND						
REMARKS:							<u>5</u>	<u>~5</u>						
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